7/24/2018 BEAR Invoice



View BEAR Invoice

PRINTABLE PAGE

Invoice ID: 2312611 Created on 12/30/2015 5:14 PM Last updated on 12/30/2015 5:14 PM

Applicant Form Identifier 14SSD-ENA

Block 1: Header Information

Need Help?

1. Billed Entity NameSALMON SCHOOL DISTRICT
301
201

2. Billed Entity Number

3. Service Provider Identification Number (SPIN)

143030857

Applicant FCC Form 498 ID

4. Contact Name

5. Contact Telephone Phone (203) 445-9577

Contact Fax

(203) 445-0456

MEGAN RESTIERI

Contact Email mrestieri@erateportal.com

6. Total Reimbursement Amount (total from Block 2, Column 14)

\$ 9194.26

Block 2: Line Item Information Per Funding Request Number

	7. FCC Form 471 Application Number (from Funding Commitment Decision Letter)	8. Funding Request Number (FRN) (from Funding Commitment Decision Letter)	9. Bill Frequency	10. Customer Billed Date	11. Shipping date to Customer or Last Day of Work Performed (mm/dd/yyyy)	12. Total (Undiscounted) Amount for Service	13. Discount e Rate	14. Discount Amount Billed to USAC (Column 12 multiplied by Column 13)	Approval Status
1)	939751	2635780		7/1/2014		\$ 11940.60 7	7	\$ 9194.26	AWAITING CERTIFICATION

Block 3: Billed Entity Certification

Need Help?

Contact Information for Billed Entity Authorized Person:

By logging into your account using your PIN, checking this box, and clicking the "certify" button at the end of the form, you have electronically signed the form. You are reminded that an electronic signature is the same as a handwritten signature on the form.

7/24/2018 **BEAR Invoice**

To see a copy of the Terms and Conditions to which you previously agreed, please click on the "Terms and Conditions" menu

Submission Date 12/30/2015

17. Name DICK HADLOCK

18. Title/Position TECHNOLOGY COORDINATOR

Address 2

20. Address 1 907 SHARKEY STREET

City SALMON State ID **Zip Code** 83467 -

19. Phone Number (208) 756-4271

19a. Fax Number (208) 756-6695

DICK.HADLOCK@SALMON291.ORG 19b. Email

19c. Name of Authorized Salmon School District 291

Person's Employer

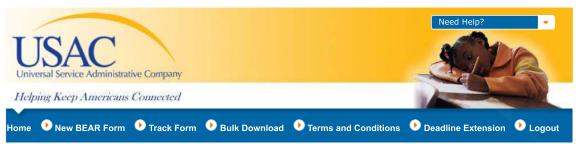
OMB Number 3060 - 0856 Form 472

SLD Home | Contact Us

Client Service Bureau: 1-888-203-8100

© 1997 - 2018, Universal Service Administrative Company. All Rights Reserved.

7/24/2018 **BEAR Invoice**



View BEAR Invoice

PRINTABLE PAGE

Invoice ID: 2675665 Created on 8/29/2017 2:54 PM Last updated on 9/1/2017 5:08 AM

Applicant Form Identifier 14SSD-472ENA

Block 1: Header Information

Need Help?

1. Billed Entity Name

2. Billed Entity Number SALMON SCHOOL DISTRICT 142674

3. Service Provider Identification Number (SPIN)

Applicant FCC Form 498 ID

4. Contact Name

443019250

MEGAN RESTIERI

5. Contact Telephone Phone Contact Fax

(203) 445-9577 (203)445-0456

Contact Email

mrestieri@erateportal.com

6. Total Reimbursement Amount (total from Block 2, Column 14)

\$ 9194.26

Block 2: Line Item Information Per Funding Request Number Need Help?

	7. FCC Form 471 Application Number (from Funding Commitment Decision Letter)	8. Funding Request Number (FRN) g (from Funding Commitment Decision Letter)	9. Bill Frequency	10. Customer Billed Date	11. Shipping date to Customer or Last Day of Work Performed (mm/dd/yyyy)	12. Total (Undiscounted) Amount for Service	13. Discount Rate	14. Discount Amount Billed to USAC (Column 12 multiplied by Column 13)	Approval Status
1)	939751	2635780		7/1/2014		\$ 11940.60	7 9	\$ 9194.26	COMPLETED

Block 3: Billed Entity Certification

Contact Information for Billed Entity Authorized Person:

By logging into your account using your PIN, checking this box, and clicking the "certify" button at the end of the form, you have electronically signed the form. You are reminded that an electronic signature is the same as a handwritten signature on the form. To see a copy of the Terms and Conditions to which you previously agreed, please click on the "Terms and Conditions" menu above.

Submission Date 8/29/2017

MEGAN RESIERI 17. Name 18. Title/Position ACCOUNT MANAGER 20. Address 1 200 Boston Post Rd Address 2 Suite 11

Orange City State CT 06477 -Zip Code

(203) 445-9577 19. Phone Number (203)445-0456 19a. Fax Number 19b. Email

mrestieri@erateportal.com

19c. Name of Authorized E-RATE ONLINE

Person's Employer

OMB Number 3060 - 0856 Form 472

7/24/2018 BEAR Invoice

.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
****	SLD Home Contact Us
	Client Service Bureau: 1-888-203-8100
	© 1997 - 2018, Universal Service Administrative Company. All Rights Reserved.
	© 1997 - 2010, Officersal Service Administrative Company. An Argins Reserved.